Name

Professional

Non-Professional



In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or disability.

Date



	lease print clearly or fill out electronically using Acrobat Reader					
	NAME: Last			First		MI
	Street Address			Telephone Number		
	City			State	Zip	
	Email					
ס	Are you 18 or older?	The Yes	D NO			
	Availability:	Given Full Time Only	Part Time Only	y 🔲 Full OR Part Time	2	
	What hours are you available to work?		Daytime	Evening	U Weekend	
	What type of job are you interested in?					
	Professional Library Position Please Specify:					
	Non-Professional Library Position Please Specify:					

Continues on the next page

List all schools attended: high school, technical/vocational, college, business, military, etc. Use another sheet, if necessary.

7	School	Did you Graduate?	Certification or Degree Received	Major/Minor Subjects
0	Name	The Yes		
EDUCATION		D NO		
EDC	Address			
	Name	YES		
		🗖 NO		
	Address			
-	Name	YES		
		🗖 NO		
	Address			

Computer Knowledge
Clerical Skills
Special interests, hobby(ies), or craft(s) – please explain:
Previous library work – please explain:

Beginning with your most recent employer, please list your last three (3) employers

Name of Employer			Job Title/Position		
Address		Telephone			
Name of Supervisor					
Dates Employed:		1			
From	From To		May we contact this employer? 🛛 Yes 🔲 No		
Brief description of o	duties:				
Name of Employer			Job Title/Position		
Address			Telephone		
Name of Supervisor	Name of Supervisor		Reason for Leaving		
Dates Employed:					
From	То	May we contact this employer? 🔲 Yes 🔲 No			
Brief description of c					
Name of Employer			Job Title/Position		
Address			Telephone		
Name of Supervisor		Reason for Leaving			
Dates Employed:					
From To May we contact this e		nployer? 🗖 Yes 🗖 No			
Brief description of d		,			

Agreement (please read before signing)

GNATURE

SI

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of my personal, employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given on the application or in the interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Stow-Munroe Falls Public Library.

Date	 	

Signature

Stow • Munroe Falls PublicLibrary

Read. Dream. Connect.

3512 Darrow Road, Stow, OH 44224 (330) 688-3295 • www.smfpl.org Mon. - Thurs. 9 AM - 9 PM • Fri. 9 AM - 6 PM Sat. 9 AM - 5 PM • Sun. 1 PM - 5 PM

An Equal Opportunity/Affirmative Action Employer